

## PART B - FEE(S) TRANSMITTAL

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26541 7590 09/21/2004

ITTER, LANG & KAPLAN  
 12930 SARATOGA AE. SUITE D1  
 SARATOGA, CA 95070

12/23/2004 EAREGAY2 00000061 10027813

01 FC:2501 700.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 30.00 OP

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Diane Elzingre	(Depositor's name)
<i>Diane Elzingre</i>	(Signature)
12/16/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/027,813	12/19/2001	Robert G. Batchko	020882-000510	9477

TITLE OF INVENTION: POLARIZATION-INSENSITIVE INTEGRATED WAVELENGTH CONVERTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	<del>\$665</del> \$700	\$300	<del>\$965</del> \$1000	12/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEE, JOHN D	2874	359-326000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Ritter, Lang &  
Kaplan LLP  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lightbit Corporation, Inc. Mountain View, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 50-1652 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Gary T. AkaDate December 16, 2004Typed or printed name Gary T. AkaRegistration No. 29,038

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/027,813	
	<b>Filing Date</b>	December 19, 2001	
	<b>First Named Inventor</b>	Robert G. Batchko	
	<b>Group Art Unit</b>	2874	
	<b>Examiner Name</b>	John D. Lee	
<b>Total Number of Pages in This Submission</b>	<b>33</b>	<b>Attorney Docket Number</b>	LBITP005

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Req.  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Return Postcard (1 page)  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>PTOL-85 Part B - Fee Transmittal</b>
<b>Remarks</b>		<b>The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652.</b>
<b>In response to the Notice of Allowance and Fee Due mailed September 21, 2004, please make the enclosed of record.</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
<b>Firm and Individual name</b>	ITTER, LANG & KAPLAN LLP Gary T. Aka, Reg. No. 29,038
<b>Signature</b>	<i>Gary T. Aka</i>
<b>Date</b>	December 16, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown:			
		December 16, 2004	
<b>Typed or printed name</b>	Diane Elzingre		
<b>Signature</b>	<i>Diane Elzingre</i>	<b>Date</b>	December 16, 2004